

demonstrated his abilities and intellect time and time again. He is well suited to be a Federal Maritime Commissioner. Currently, John works representing the American Waterways Operators, as their Vice President for legislative affairs. John also has an outstanding reputation within the maritime and transportation industry sectors.

I congratulate these two deserving individuals, who have been appointed to the agency which plays such a critical role in international trade.●

THE REPUBLICAN PATIENTS' BILL OF RIGHTS ACT

● Mr. ENZI. Mr. President, I rise to speak in strong support of S. 2330, the Patients' Bill of Rights Act. As an original cosponsor, I'm confident that this legislation is the logical step to ensure Americans accessible and affordable healthcare.

On January 13, 1998, the Majority Leader created the Republican Health Care Task Force to begin pouring the foundation for a comprehensive piece of legislation that would enhance the quality of care without dismantling access and affordability. For the last seven months, the task force met every Thursday—and other times as needed—with scores of stakeholders prior to writing this bill. Such thorough steps in writing a bill have clearly paid off. We now have legislation that would provide patients' rights and quality healthcare without nationalized, bureaucratized, budget-busting, one-size-fits-all mandates.

In 1993, President and Mrs. Clinton launched an aggressive campaign to nationalize the delivery of healthcare under the guise of modest reform. The sales pitch was backed with scores of anecdotes illustrated from Presidential podiums across the country. The stories pulled on the heartstrings of all Americans and were intentionally aimed at injecting fear and paranoia into all persons covered or not covered by private health insurance.

I am quick to ask my constituents interested in the President's bill to carefully examine the fine print. It's no surprise to me that most of them already have. The American people haven't forgotten the last time this Administration tried to slip nationalized healthcare past their noses. Folks in this town may be surprised to learn that the American people aren't a bunch of pinheads. Anyone can put lipstick on a pig, give it a fancy Hollywood title, and hope for an election-year slam dunk. Expecting the public to close its eyes and kiss that pig, however, is an entirely different matter.

The American people understand what's going on here. They know full well that higher premiums mean no coverage. Why? Because affordable access to healthcare is an even higher priority than quality. If it isn't affordable, it doesn't exist! By issuing one-size-fits-all mandates and setting the

stage for endless litigation, the President's bill could dramatically raise the price of premiums—barring people from purchasing insurance. The President would be well advised to call his legislation the "Patient's Bill," because a costly bill is exactly what Americans would receive. That's the bottom line for American families—the cost. We all want quality. There isn't a member in Congress who doesn't want quality. But if Americans are expected to pay up to 23 percent higher premiums to get it, they'll most often have to go without insurance. It's that simple.

I remember the reaction Wyoming residents had to the 1993 "Clinton Care" plan. I was a State Senator living in Gillette, Wyoming at the time. I recall how the President and First Lady rode a bus across America—promoting nationalized healthcare. I also remember the detour they took when they arrived at the Wyoming border. Instead of entering my home state, they chose a more populated route through Colorado. That was an unfortunate choice. They missed an important healthcare point. Had they driven all 400 miles across southern Wyoming, they would have seen for themselves why one-size-fits-all legislation doesn't work in rural, under-served states.

Affordable and accessible care is THE life-line for Wyoming residents. I live in a city of 22,000 people. It's 145 miles to another town of equal or greater size. Many of my constituents have to drive up to 125 miles one-way just to receive basic care. More importantly, though, is the difficulty we face enticing doctors and practitioners to live and practice medicine in Wyoming. I'm very proud of Wyoming's health care professionals. They practice with their hearts, not their wallets.

In a rural, under-served state like Wyoming, only three managed care plans are available and that covers just six counties. Once again, this is partly due to my state's small population. Managed care plans generally profit from high enrollment, and as a result, the majority of plans in Wyoming are traditional indemnity plans—commonly known as fee-for-service. Some folks might wonder why I am so concerned about the President's healthcare package, especially since it's geared toward managed care. I'm concerned because a number of Wyoming insurers offer managed care plans elsewhere. Any premium hike spurred by mandates in the Presidents' bill could be distributed across the board—causing increases in the fee-for-service premiums in Wyoming. Simply put, my constituents could easily end up paying for services they'll never get! 40 percent of my constituents are self-insured—meaning they pay for their own health insurance out of their own pockets. Expecting my constituents to pay more poses a clear and potential threat to exclude them from health insurance coverage. The urban areas get the care—we get the cost. Added cost—that's it—that's all.

The Republican plan is the right choice for America. It would safeguard 48 million people out of the 124 million now covered by the 1974 Employee Retirement Income Security Act or ERISA by requiring that group healthcare plans provide enrollees with: access to emergency medical care; point-of-service coverage; access to ob-gyn care; access to pediatric care; continuity of care; and, a ban on patient/doctor "gag" rules. ERISA plans, whether fully-insured or self-insured, would also be required to provide enrollees with information about plans and providers such as options, restrictions and descriptions.

The Republican Patients' Bill of Rights would also allow a patient to hold their health plan accountable. The President's bill, however, would allow a patient to sue their own health plan and tie up state courts with litigation for months or years. The only people that benefit from this would be trial lawyers. The patient, however, would be lucky to get a decision about their plan before their ailment advanced or even took their life. A big settlement doesn't do much good if you got it, because you died while the trial lawyers fiddled with the facts. Folks aren't interested in suing their health plan. They watch enough court-TV shows to know how expensive that process is and how long it takes to get a decision made. This isn't L.A. Law—it's reality. The Republican Patients' Bill of Rights avoids all this by incorporating an internal appeals process that doesn't exceed 72 hours. If not satisfied, an enrollee would be able to access an external review by independent medical experts. Getting quick decisions saves lives.

The President has repeatedly said that the Republican Patients' Bill of Rights should apply to all health insurance plans. Such claims are no different than those made by the President back in 1993. He wants nationalized healthcare—plain and simple. There is a reason the Republican bill only amends ERISA. It's because the 124 million ERISA enrollees are not regulated by the states. The states, by the way, have been in the business of regulating the health insurance industry far longer than Congress or any President was beating up on managed care.

The President wants all regulatory decisions about a person's health insurance plan to be made from Washington—nationalized care. The reason this won't work is that it fails to take into account the unique type of healthcare provided in states like Wyoming. While serving in the Wyoming Legislature for 10 years, I gained tremendous respect for our state insurance commissioner's ability to administer quality guidelines and insurance regulations that cater to our state. State regulation and understanding is absolutely, unequivocally essential. I firmly believe that decisions which impact my constituents' health insurance should continue

to be made in Cheyenne—not Washington.

Congress has an obligation to ensure such quality services to the 124 million ERISA enrollees whose plans are currently absent these protections. In doing so, however, the Republican bill stays within its jurisdictional boundaries and doesn't trample over states' rights. As a result, Americans can gain protections whether they are insured under a state, ERISA, or Medicare regulated plan. I believe that this approach is rational and fair.

The Republican Patients' Bill of Rights would provide individual rights with respect to a person's own, personal health information. Access to personal medical records is a delicate matter. Provisions, however, are included to address inspection and copying of a person's medical information. Safeguards and enforcement language has also been added to guarantee confidentiality. In relation to this language, group health plans and health insurance issuers in both the group and individual market would be prohibited from collecting or using predictive genetic information about a patient with the intention of denying health insurance coverage or setting premium rates.

The Republican plan would establish the Agency for Healthcare Quality Research. This is not a new federal agency, but rather a new name for the current Agency for Health Care Policy and Research within the Department of Health and Human Services. This agency would be modernized to improve healthcare quality throughout America. The agency would not mandate a national definition of quality, but it would provide information to patients regarding the quality of care people receive, allow physicians to compare their quality outcomes with their peers, and enable employers and individuals to make prudent purchases based on quality.

The Senate Labor Committee held a number of hearings in relation to women's health research and prevention. As a result, the Republican Patients' Bill of Rights includes a number of important provisions that represent women's health. These provisions will clearly benefit the promotion of basic and clinical research for osteoporosis, breast and ovarian cancer, the effects of aging and other women's health issues.

Finally, the Republican Patients' Bill of Rights broadens access to coverage by removing the 750,000 cap on medical savings accounts (MSA's). MSA's are a success and should be made available to anyone who wishes to control their own healthcare costs. Moreover, persons who pay for their own health insurance could deduct 100 percent of the costs if the Republican plan is enacted. This would have a dramatic impact on folks from Wyoming. These provisions would, without a doubt, pave the way for quality healthcare to millions of Americans without dismantling access and affordability.

While the President's bill has been pitched as being essential to enhancing the quality of care Americans receive, I hope that my colleagues will carefully evaluate the impact that any nationalized, bureaucratized, budget-busting, one-size-fits-all bill would have on our nation's healthcare system. As I have encouraged my constituents to read the fine print, I ask my colleagues to consider how the President's legislation impacts you and your home state. Rural states deserve a voice, too. Only the Republican Patients' Bill of Rights Act would give them that voice.●

HURRICANE GEORGES AND THE DISASTER MITIGATION ACT OF 1998

● GRAHAM. Mr. President, on September 30th, with my colleagues Senator MACK and Florida Governor Lawton Chiles, I participated in a helicopter tour of Florida's Panhandle, where once again, Mother Nature has subjected Florida's citizens to her wrath. After first devastating the Florida Keys, Hurricane Georges moved northward and severely impacted the Panhandle, producing rainfall in excess of 2 feet in some areas.

In the Florida Keys, Georges damaged over 1,500 homes destroying or causing major damage to approximately 640 residences. Initial estimates indicate that Georges caused over \$250 million in insured damage in the Keys, and there are millions more in uninsured damages. Many residents in the lower Keys have only recently had their power restored, and Federal, State, local, and voluntary agencies provided food, water, and ice for more than a week as the Keys finally emerged from this emergency situation.

Unfortunately—as I was able to view firsthand—Georges path of destruction did not end in the Keys. Even in its weakened state, Georges caused extensive flooding and isolated tornadoes throughout the Panhandle. At least 20 major roads were closed or partially closed, and evacuations continued for days in many low-lying areas. During my visit to the area, 14 shelters remained open, providing safe harbor for at least 400 Floridians who had been forced from their homes.

As a result of this hurricane, the President issued an emergency declaration for 33 Florida counties, in order to provide immediate Federal assistance to protect the lives and property of affected residents. On September 28, the President issued a major disaster declaration for Monroe County, which authorizes Federal disaster recovery assistance for local governments and citizens in the Florida Keys. As of today, 16 counties in and around the Panhandle have been added to this declaration, and I want to acknowledge the outstanding efforts of both the President and the Federal Emergency Management Agency (FEMA) in expe-

ditioning Federal assistance to the State of Florida.

Mr. President, throughout 1998, I have come to the Senate floor to describe the destruction and misery that Florida has experienced as a direct result of natural disasters. This year, Florida has been subjected to a series of unprecedented natural disasters. Even for a state that is experienced in dealing with such disasters, Floridians have been tested again and again by what may be one of the worst years in Florida meteorological history. In late January and early February—in the midst of our State's dry season—several Northern Florida counties were deluged by massive floods. Not long after, parts of Central Florida were devastated by thunderstorms and tornadoes that are more typical in the summer months. Beginning in May and ending in late July, a deadly combination of intense heat and prolonged drought sparked more than 2,000 forest fires in Florida's 67 counties. Finally, over the next several weeks, Florida will begin the long and painful process of recovery from the widespread damage that has been caused by Hurricane Georges.

I ask that this September 30 article from the Miami Herald—which summarizes Florida's 6 Presidential disaster declarations in more detail—be printed in the RECORD.

The article follows:

FLORIDA GET FEDERAL AID A RECORD SIX TIMES

(By Tom Fiedler)

For Floridians, this has been a banner year of hell and high water. President Clinton said so.

Even before Hurricane Georges slapped the Keys unsilly, then dumped tons of fresh rain on an already sodden Panhandle, Florida had established in 1998 a new—although dubious—record: recipient of the most presidential disaster declarations in a single year.

"It's been a very hard year," said Joseph Myers, state director of emergency management, who on Tuesday was into his seventh straight day of working around the clock monitoring the latest disaster. "But that's what we get paid to do."

He would be entitled to wonder if that could possibly be pay enough, at least this year.

Like home-run sluggers Mark McGwire and Sammy Sosa, Florida established its new record with style, shattering the previous marks by more than a couple.

Since New Year's Day, which Myers spent monitoring a chain of tornadoes ripping their way across the central peninsula, causing at least \$24 million in damage to crops and homes. President Clinton has declared at least parts of Florida to be federal disaster areas six times.

That topped the previous records of three in 1992—the year that included the mother of all disaster declarations. Hurricane Andrew—and 1995, which featured Hurricanes Erin and Opal, both concentrating their fury on the upper Gulf Coast.

To qualify for a presidential disaster declaration, the amount of damage must be beyond the ability of state and local government to assist, either because of the amounts of money involved or the types of assistance needed.

When the president issues a declaration, it makes available federal money to reimburse